DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 08/18/2006

Provider Inspection Summary

For the period 07/01/2003 to 06/30/2006 Adult Family Home STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: PARK HOUSE (0009727)

Address: 1041 S PARK STREET, SHAWANO, WI 54166

License Status: REGULAR

Licensed/Certified/Registered 07/23/2002

Regional Office: NORTHERN REGION (RHINELANDER), (715) 365-2800

Survey History

Survey ID: 0093165 End Date: 08/09/2004 Type: STANDARD Purpose: SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

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